

**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Ogawa	Robert	T.	(808) 521-4265
MAILING ADDRESS (Street)			FAX
1188 Bishop Street, Suite 3105			
(City)	(State)	(Zip Code)	
Honolulu,	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Aequus Corporation on behalf of Lenscrafters			(360) 352-3100
MAILING ADDRESS (Street)			FAX
P.O. Box 1379			(360) 705-3100
(City)	(State)	(Zip Code)	
Olympia,	WA	98507	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Robert T. Ogawa			(808) 521-4265
MAILING ADDRESS (Street)			FAX
1188 Bishop Street, Suite 3105, Honolulu, HI 96813			
(City)	(State)	(Zip Code)	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> Agriculture                               | <input type="checkbox"/> Education                       | <input type="checkbox"/> Human Services                                     | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs                | <input type="checkbox"/> Labor & Employment                                 | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation      | <input checked="" type="checkbox"/> Health               | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                    |
| <input type="checkbox"/> Ecology, Energy Environmental Protection  | <input type="checkbox"/> Housing                         | <input type="checkbox"/> Public Safety & Corrections                        |   |

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

  
(Signature of Lobbyist)

1-25-05  
(Date)

**PART V AUTHORIZATION TO LOBBY**


NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
<b>Randall E. Ray,</b>	<b>President</b>

NAME OF ORGANIZATION (if applicable)	TELEPHONE
<b>Aequus Corporation</b>	<b>(360) 352-3100</b>

MAILING ADDRESS (Street)	FAX
<b>P.O. Box 1379</b>	<b>(360) 705-3100</b>

(City)	(State)	(Zip Code)
<b>Olympia,</b>	<b>WA</b>	<b>98507</b>

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

  
(Signature of Authorizing Officer or Person Represented)

October 26, 2004  
(Date)